GENERAL FACT SHEET

Fill-in form, tab to next field

BILL NUMBER 10R-184

BRIEF IIILE	APPROVED DEADLINE		REASON			
Nebraska Department of Health						
and Human Services		***************************************				
DETAILS			POSITIONS/RECOMMENDATIONS			
Grant award from the Nebraska Department of Health and Human Services to the City of Lincoln on behalf of the Lincoln-Lancaster County Health Department for	ehalf of	oonsor				
the Mobilizing for Action Through Planning and Partnerships Program. The grant award is \$15 for July 1, 2010 - December 31, 2011.	Pro 5,000.00 De	ogram epartments, or oups Affected				
		pplicants/ oponents	Applicant			
			City Department			
			Other			
Discussion (Including Relationship to other Council Actions)	ncil Op	ponents	Groups or Individuals			
			Basis of Opposition			
	Sta Re	aff commendations	☐ For ☐ Against Reason Against			
	Co	ard or mmission commendation	BY For Against No Action Taken For with revisions or conditions (See Details column for conditions)			
	AC	TY COUNCIL TIONS or Council Use ly)	Pass Pass (As Amended) Council Sub. Without Recommendation Hold Do not Pass			

DETAILS	LS POLICY/PROGRAM IMPACT						
<i>€</i> "	POLICY OR PROGRAM CHANGE	NO YES					
	OPERATIONAL IMPACT ASSESSMENT						
	FINANCES						
	COST AND REVENUE	COST of total project: \$ COST of this Ordinance/					
	PROJECTIONS	Resolution \$					
		RELATED annual operating Costs \$					
		INCREASE REVENUE EXPECTED/YEAR \$					
	SOURCE OF FUNDS	CITY [Approximately]	%				
	Tokes	\$ \$	%				
		\$\$	%				
		\$ \$					
		\$	%				
		NON CITY [Approximately]\$	%				
		\$ 	%				
		\$\$	[/] / _%				
		\$	%				
		\$	%				
	BENEFIT COST						
	Front Foot	Average Ass	sessment				
	☐ Square Foot \$	\$\$					

APPLICABLE I	D٨	T۶	ES	;
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FACT SHEET PREPARED BY: Bruce D. Dart, PhD, Health Director

REVIEW BY:

REFERENCE NUMBER